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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY	_	
Case number (if known)	_ Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

04/20

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

rt 1:	Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
You	r full name		
your	government-issued ire identification (for	Carlos First name	First name
licer	se or passport).	Middle name	Middle name
iden	tification to your	Jaime Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
your num Indi	r Social Security ber or federal vidual Taxpayer tification number	xxx-xx-0553	
	You Write your pictu exar licen Bring iden mee	Your full name Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. All other names you have used in the last 8 years Include your married or maiden names. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number About Debtor 1: Carlos First name M Middle name Jaime Last name and Suffix (Sr., Jr., II, III) xxx-xx-0553

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Debtor 1 Carlos M Jaime Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EIN	☐ I have not used any business name or EINs. Business name(s) EIN
5.	Where you live	13 Harrison Street	If Debtor 2 lives at a different address:
		Sayreville, NJ 08872 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Middlesex County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known) Debtor 1 Carlos M Jaime Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. District When Case number When Case number District Case number District When 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. No. residence? Has your landlord obtained an eviction judgment against you? ☐ Yes. No. Go to line 12.

this bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of

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Case number (if known) Debtor 1 Carlos M Jaime Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? ☐ Yes. Name and location of business A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to Chapter 11 of the proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or Bankruptcy Code, and you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, are you a small business cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. debtor or a debtor as § 1116(1)(B). defined by 11 U.S.C. § 1182(1)? I am not filing under Chapter 11. ■ No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy ☐ No. U.S.C. § 101(51D). I am filing under Chapter 11, I am a small business debtor according to the definition in the Bankruptcy Code, and ☐ Yes. I do not choose to proceed under Subchapter V of Chapter 11. I am filing under Chapter 11, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I ☐ Yes. choose to proceed under Subchapter V of Chapter 11. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is ☐ Yes. alleged to pose a threat of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any property that needs If immediate attention is needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs? Number, Street, City, State & Zip Code

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Debtor 1 Carlos M Jaime Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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DCD	Carlos IVI Jairile				Case Hamber (#	Milowii)	
Par	6: Answer These Questi	ions for Re	porting Purposes				
16.	What kind of debts do you have?		Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b.				
			Yes. Go to line 17.				
			Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.				
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts yo	ou owe that are not consumer d	lebts or business d	ebts	
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chap	oter 7. Go to line 18.			
	Do you estimate that after any exempt property is excluded and			7. Do you estimate that after a available to distribute to unse		is excluded and administrative expenses	
	administrative expenses		■ No				
	are paid that funds will be available for distribution to unsecured creditors?		□ Yes				
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000		☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000	
19.	How much do you estimate your assets to be worth?	■ \$0 - \$5 □ \$50,00 □ \$100,0		□ \$1,000,001 - \$10 □ \$10,000,001 - \$5 □ \$50,000,001 - \$1 □ \$100,000,001 - \$	00 million 00 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion	
20.	How much do you estimate your liabilities to be?	□ \$100,0	0,000 01 - \$100,000 01 - \$500,000 01 - \$1 million	□ \$1,000,001 - \$10 □ \$10,000,001 - \$5 □ \$50,000,001 - \$1 □ \$100,000,001 - \$	00 million 00 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion	
Part	7: Sign Below						
For	you	If I have c United Sta If no attori document	nosen to file under Chapte ites Code. I understand th ney represents me and I d I have obtained and reac	er 7, I am aware that I may pro ne relief available under each c	ceed, if eligible, un chapter, and I choos neone who is not ar .C. § 342(b).	der Chapter 7, 11,12, or 13 of title 11, se to proceed under Chapter 7. n attorney to help me fill out this	
		I understa bankruptc and 3571.	nd making a false stateme	ent, concealing property, or ob	taining money or p	roperty by fraud in connection with a rs, or both. 18 U.S.C. §§ 152, 1341, 1519,	
		Carlos N Signature	I Jaime of Debtor 1	Sign	nature of Debtor 2		
		Executed	on <u>May 14, 2021</u> MM / DD / YYYY	Exe	ecuted on MM / D	DD / YYYY	

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Debtor 1 Carlos M Jaime Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Robert C. Nisenson Signature of Attorney for Debtor	Date	May 14, 2021 MM / DD / YYYY
Robert C. Nisenson 6680 Printed name		
Robert C. Nisenson, L.L.C.		
10 Auer Court East Brunswick, NJ 08816 Number, Street, City, State & ZIP Code		
Contact phone 732-238-8777	Email address	rnisenson@aol.com
6680 NJ Bar number & State		

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Fill in this infor	mation to identify your	case:	.,	
Debtor 1	Carlos M Jaime			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number				
(if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Pai	t 1: Summarize Your Assets		
		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	770.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	770.0
Pai	t 2: Summarize Your Liabilities		
			abilities you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.0
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	67,906.00
	Your total liabilities	\$	67,906.00
Pai	t 3: Summarize Your Income and Expenses		
1.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,023.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	2,375.00
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	edules.
7.	■ Yes What kind of debt do you have?		

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Carlos M Jaime Case number (if known)

3. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fill in this infor	mation to identify your	case and this filing:		
Debtor 1	Carlos M Jaime			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
I Inited States Ra	ankruptcy Court for the:	DISTRICT OF NEW JERSE	_	
Officed States Do	ankruptcy Court for the.	DISTRICT OF NEW SERSE	<u>'</u>	
Case number				☐ Check if this is an amended filing
Official Fo	orm 106A/B			
Schedul	le A/B: Prop	erty		12/15
chink it fits best. Enformation. If mon Answer every quest Part 1: Describe	Be as complete and accura re space is needed, attach stion. E Each Residence, Building	ate as possible. If two married po		sible for supplying correct
_		· · · · · · · · · · · · · · · · · · ·	g,,	
No. Go to Pa				
☐ Yes. Where	is the property?			
		uitable interest in any vehicl	as whather they are registered or not? Incl	ude any vehicles you own that
	•	le, also report it on Schedule (G: Executory Contracts and Unexpired Leases	
	•			
3. Cars, vans, tr	•			
3. Cars, vans, tr ■ No □ Yes 4. Watercraft, ai	rucks, tractors, sport ut	tility vehicles, motorcycles		
3. Cars, vans, tr ■ No □ Yes 4. Watercraft, ai Examples: Box ■ No □ Yes 5 Add the dollar	rucks, tractors, sport un ircraft, motor homes, A ats, trailers, motors, person ar value of the portion	tility vehicles, motorcycles TVs and other recreational vessels onal watercraft, fishing vessels	G: Executory Contracts and Unexpired Leases vehicles, other vehicles, and accessories	\$0.00
No □ Yes No □ Yes No □ Yes Add the dolla pages you here.	rucks, tractors, sport uniformal distribution in the portion of th	tility vehicles, motorcycles TVs and other recreational vessels onal watercraft, fishing vessels you own for all of your entrice. Write that number here	G: Executory Contracts and Unexpired Leases vehicles, other vehicles, and accessories s, snowmobiles, motorcycle accessories es from Part 2, including any entries for	\$0.00
3. Cars, vans, tr ■ No □ Yes 4. Watercraft, ai Examples: Box ■ No □ Yes 5 Add the dolla pages you here.	rucks, tractors, sport uniformal distribution in the portion of th	tility vehicles, motorcycles TVs and other recreational vessels onal watercraft, fishing vessels you own for all of your entric.	G: Executory Contracts and Unexpired Leases vehicles, other vehicles, and accessories s, snowmobiles, motorcycle accessories es from Part 2, including any entries for	\$0.00
3. Cars, vans, tr No Yes 1. Watercraft, ai Examples: Boa No Yes 5 Add the dolla pages you ha Part 3: Describe Do you own or 6. Household gr Examples: Ma No No	ircraft, motor homes, A ats, trailers, motors, personal ar value of the portion yave attached for Part 2. e Your Personal and Hous have any legal or equit	tility vehicles, motorcycles TVs and other recreational vessels onal watercraft, fishing vessels you own for all of your entrice. Write that number here	G: Executory Contracts and Unexpired Leases vehicles, other vehicles, and accessories s, snowmobiles, motorcycle accessories es from Part 2, including any entries for	Current value of the portion you own? Do not deduct secured
3. Cars, vans, tr No Yes 4. Watercraft, ai Examples: Boa No Yes 5 Add the dolla pages you have Part 3: Describe Do you own or 6. Household ge Examples: Ma	ircraft, motor homes, A ats, trailers, motors, personal ar value of the portion yave attached for Part 2. e Your Personal and Hous have any legal or equit	TVs and other recreational vonal watercraft, fishing vessels which we water that number here	G: Executory Contracts and Unexpired Leases vehicles, other vehicles, and accessories s, snowmobiles, motorcycle accessories es from Part 2, including any entries for	Current value of the portion you own? Do not deduct secured

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

 \square No

Filed 05/14/21 Entered 05/14/21 15:23:28 Case 21-14025-CMG Doc 1 Desc Main Document Page 11 of 56 Debtor 1 Case number (if known) Carlos M Jaime Yes. Describe..... \$100.00 TV 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories ☐ No Yes. Describe..... \$100.00 **Usual Wear** 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No ☐ Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses ■ No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$700.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition No ☐ Yes.....

17. Deposits of money

Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

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De	ebtor 1	Carlos M Jaime	Case numbe	r (if known)
		17.1.	TD Bank - Checking	\$70.0
18.		, mutual funds, or publicly traded ples: Bond funds, investment accou	d stocks unts with brokerage firms, money market accounts	
		Institutio	n or issuer name:	
19.	joint v	ublicly traded stock and interests enture	s in incorporated and unincorporated businesses, including	an interest in an LLC, partnership, an
	■ No □ Yes	Give specific information about the	em	
	— 103.	Name of ent		ship:
20.	Negoti	iable instruments include personal	other negotiable and non-negotiable instruments checks, cashiers' checks, promissory notes, and money orders. u cannot transfer to someone by signing or delivering them.	
	☐ Yes.	Give specific information about the Issuer name		
21.	Examp	ment or pension accounts oles: Interests in IRA, ERISA, Keog	h, 401(k), 403(b), thrift savings accounts, or other pension or pro	ofit-sharing plans
	■ No			
	⊔ Yes.	List each account separately. Type of account	nt: Institution name:	
22.	Your s Examp		ve made so that you may continue service or use from a compar epaid rent, public utilities (electric, gas, water), telecommunication	
	■ No □ Yes.		Institution name or individual:	
23.	_	ies (A contract for a periodic paym	ent of money to you, either for life or for a number of years)	
	■ No □ Yes	Issuer name and de	scription.	
24.	26 U.S.	ts in an education IRA, in an acc C. §§ 530(b)(1), 529A(b), and 529(ount in a qualified ABLE program, or under a qualified state b)(1).	tuition program.
	■ No □ Yes	Institution name and	d description. Separately file the records of any interests.11 U.S.C	C. § 521(c):
25.	. Trusts, ■ No	, equitable or future interests in	property (other than anything listed in line 1), and rights or p	owers exercisable for your benefit
	_	Give specific information about the	em	
26.	Examp		secrets, and other intellectual property ites, proceeds from royalties and licensing agreements	
	■ No □ Yes.	Give specific information about the	em	
27.		es, franchises, and other genera ples: Building permits, exclusive lice	Il intangibles enses, cooperative association holdings, liquor licenses, professi	ional licenses
	☐ Yes.	Give specific information about the	em	
M	oney or	property owed to you?		Current value of the

portion you own?

Do not deduct secured claims or exemptions.

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Del	otor 1	Carlos M Jaime	Case number (if known)	
_	Tax re	funds owed to you		
_	_	Give specific information about them, including whether	ther you already filed the returns and the tax years	
ļ	Exam _i ■ No	y support ples: Past due or lump sum alimony, spousal support Give specific information	;, child support, maintenance, divorce settlement, property	settlement
_		amounts someone owes you ples: Unpaid wages, disability insurance payments, d benefits; unpaid loans you made to someone el	lisability benefits, sick pay, vacation pay, workers' comperse	nsation, Social Security
_	_	Give specific information		
ļ	Exam _l ■ No		gs account (HSA); credit, homeowner's, or renter's insurar	ice
I	⊒ Yes.	Name the insurance company of each policy and list Company name:	tits value. Beneficiary:	Surrender or refund value:
ı	If you somed	aterest in property that is due you from someone ware the beneficiary of a living trust, expect proceeds from has died. Give specific information	who has died from a life insurance policy, or are currently entitled to rece	eive property because
ļ	<i>Exam</i> ■ No	s against third parties, whether or not you have fil ples: Accidents, employment disputes, insurance claim		
į	No		re, including counterclaims of the debtor and rights to	set off claims
		Describe each claim		
ı	No	nancial assets you did not already list Give specific information		
36.		the dollar value of all of your entries from Part 4, i	including any entries for pages you have attached	\$70.00
Par	t 5: De	escribe Any Business-Related Property You Own or Have	e an Interest In. List any real estate in Part 1.	
_		own or have any legal or equitable interest in any busine	ess-related property?	
	_	o to Part 6. Go to line 38.		
	1 165. (GO to line 36.		
Par		escribe Any Farm- and Commercial Fishing-Related Prop you own or have an interest in farmland, list it in Part 1.	perty You Own or Have an Interest In.	
46.	_ `	u own or have any legal or equitable interest in an . Go to Part 7.	ny farm- or commercial fishing-related property?	
	_	s. Go to line 47.		
		-		

Describe All Property You Own or Have an Interest in That You Did Not List Above

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Deb	tor 1 Carlos M Jaime			Case number (if known)	
	Do you have other property of any kind you did not already Examples: Season tickets, country club membership	list?			
	No				
	Yes. Give specific information				
54.	Add the dollar value of all of your entries from Part 7. Wri	te that no	umber here		\$0.00
Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5		\$0.00		
57.	Part 3: Total personal and household items, line 15		\$700.00		
58.	Part 4: Total financial assets, line 36		\$70.00		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61		\$770.00	Copy personal property total	al \$770.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62	<u> </u>			\$770.00

Official Form 106A/B Schedule A/B: Property page 5

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Fill in this information to identify your case:						
Debtor 1	Carlos M Jaime]		
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bar	nkruptcy Court for the:	DISTRICT OF NEW JERSEY				
Case number _						
(if known)				☐ Check if this is an amended filing		

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property	You Claim as Exempt
-------------------------------	---------------------

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
Schedule A/B that has this property	Copy the value from Schedule A/B	Copy the value from Check only one box for each exemption.		
Furniture Line from Schedule A/B: 6.1	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)
Zino nom concada 702. cm			100% of fair market value, up to any applicable statutory limit	
TV Line from Schedule A/B: 7.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)
Ellic Holli Golledale 74 B. 111			100% of fair market value, up to any applicable statutory limit	
Usual Wear Line from Schedule A/B: 11.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)
Line Holli Schedule A/B. 1111			100% of fair market value, up to any applicable statutory limit	
TD Bank - Checking Line from Schedule A/B: 17.1	\$70.00		\$70.00	11 U.S.C. § 522(d)(5)
Line from Sofiedule A/D. 11.1			100% of fair market value, up to any applicable statutory limit	

П

No

Yes

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

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Debtor 1 Carlos M Jaime Case number (if known)

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Fill in this information to identify your case:					
Debtor 1	Carlos M Jaime				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JEE	RSEY		
Case number					
(if known)					

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - \square Yes. Fill in all of the information below.

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			Document	Page 18	3 of 56		
Fill in thi	s information to identify you	ur case:					
Debtor 1	Carlos M Jaime						
DODIO! 1	First Name	Middle N	lame	Last Name			
Debtor 2							
(Spouse if, f	iling) First Name	Middle N	lame	Last Name	_		
United St	ates Bankruptcy Court for the	: DISTRICT	OF NEW JERSEY				
Case nur	nber						
(if known)			_				Check if this is an
							amended filing
Official	Form 106E/F						
	ule E/F: Creditors	Who Have	Unsecured	Claims			12/15
any execut Schedule (Schedule I left. Attach name and	plete and accurate as possible. ory contracts or unexpired leas S: Executory Contracts and Une D: Creditors Who Have Claims S the Continuation Page to this p case number (if known).	es that could res expired Leases (C secured by Prope page. If you have	ult in a claim. Also li official Form 106G). D rty. If more space is I no information to rep	ist executory of not include needed, copy	contracts on Schedule A/B: F any creditors with partially s the Part you need, fill it out, i	Property (Office secured claim number the	ficial Form 106A/B) and on ms that are listed in entries in the boxes on the
Part 1:	List All of Your PRIORITY						
_	y creditors have priority unsecu	ıred claims agair	st you?				
	. Go to Part 2.						
☐ Ye	S.						
Part 2:	List All of Your NONPRIOR	RITY Unsecured	l Claims				
	y creditors have nonpriority un						
_			-				
⊔ No	You have nothing to report in this	s part. Submit this	form to the court with	your other sche	edules.		
Ye	S.						
unsec	Il of your nonpriority unsecured ured claim, list the creditor separa ne creditor holds a particular clain	tely for each claim	. For each claim listed	, identify what t	ype of claim it is. Do not list cla	aims already	included in Part 1. If more
							Total claim
4.1	American Honda Finance		Last 4 digits of acc	ount number	9301		\$799.00
5	Ionpriority Creditor's Name C/O Synergetic Communi 1450 N.W Central #220 Houston, TX 77092	cation, Inc	When was the debt	incurred?	Opened 10/15 Last /	Active	
	lumber Street City State Zip Code		As of the date you f	file, the claim i	s: Check all that apply		
	Vho incurred the debt? Check or		,	,			
	Debtor 1 only		☐ Contingent				
Г	Debtor 2 only		☐ Unliquidated				
_	Debtor 1 and Debtor 2 only		☐ Disputed				
	At least one of the debtors and	another	Type of NONPRIOR	ITY unsecured	d claim:		
_	Check if this claim is for a co		☐ Student loans				
d	ebt s the claim subject to offset?	······	Obligations arisin		ration agreement or divorce th	at you did no	ot
	No				g plans, and other similar debt	s	
	■ No I Yes		•	-	g piano, and other ominar debi	~	
L	u res		Other. Specify	LUASU			

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Debtor	1 Carlos M Jaime		Case number (if known)			
4.2	Amex	Last 4 digits of account number	7673	\$10,048.00		
	Nonpriority Creditor's Name C/O Nationwide Credit, Inc Po Box 14581	When was the debt incurred?	Opened 09/08 Last Active 6/25/18			
	Des Moines, IA 50306 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	■ No	☐ Debts to pension or profit-sharin				
	Yes	■ Other. Specify Credit Card	<u> </u>			
4.3	Bard Cardiology Nonpriority Creditor's Name	Last 4 digits of account number		\$32.00		
	PO Box 100260 Staten Island, NY 10310	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	Yes	Other. Specify				
4.4	Capio Partners Llc	Last 4 digits of account number	3462	\$1,516.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3498	When was the debt incurred?	Opened 04/20			
	Sherman, TX 75091 Number Street City State Zip Code	As of the date you file, the claim i				
	Who incurred the debt? Check one.	Пол				
	■ Debtor 1 only □ Contingent □ Debtor 2 only □ Unliquidated □ Debtor 1 and Debtor 2 only □ Disputed □ At least one of the debtors and another Type of NONPRIORITY unsecured claim:					
	Check if this claim is for a community					
	debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a sepa report as priority claims	rration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	□Yes	Other. Specify Collection	Attorney Community Ema			

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Debloi	Carios M Jaime		Case number (if kno	wn)		
4.5	Chase Card Services	Last 4 digits of account number	8402		\$11,340.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 03/11 07/18	Last Active		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that appl	v		
	Who incurred the debt? Check one.	•		•		
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or o	livorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other sin	nilar debts		
	Yes	Other. Specify Credit Card	I			
4.6	Community Medical Center	Last 4 digits of account number			\$1,516.00	
	Nonpriority Creditor's Name C/O EMA PO Box 6081	When was the debt incurred?				
	Parsippany, NJ 07054					
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that appl	у		
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	 Obligations arising out of a separeport as priority claims 	ration agreement or c	livorce that you did not		
	■ No	☐ Debts to pension or profit-sharin	g plans, and other sin	nilar debts		
	□Yes	Other. Specify				
					*	
4.7	Community Medical Center Nonpriority Creditor's Name	Last 4 digits of account number			\$325.00	
	C/O BCA Financial Services, Inc 18001 Old Cutler Road Suite 462 Miami, FL 33157-6437	When was the debt incurred?				
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that appl	у		
	Who incurred the debt? Check one.					
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	-	•		
	No	Debts to pension or profit-sharing	g plans, and other sin	nilar debts		
	Yes	Other. Specify				

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Carios IVI Jaime		Case number (if known)	
Discover Financial	Last 4 digits of account number	3024	\$11,776.00
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3025 New Albany, OH 43054 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim	Opened 12/08 Last Active 8/28/18 is: Check all that apply	
<u> </u>			
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	<u></u>	d claim:	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
<u> </u>			
☐ Yes	Other. Specify Credit Card	<u> </u>	
First Credit Services	Last 4 digits of account number	5317	\$203.00
Attn: Bankruptcy Po Box 55 3 Sciles Ave	When was the debt incurred?	Opened 9/27/18	
	— As of the data way file the claim	in Charle all that apply	
Who incurred the debt? Check one.	As of the date you file, the claim	іs: Спеск ан шатарріу	
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	<u></u>	d claim:	
☐ Check if this claim is for a community			
Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
No	Debts to pension or profit-sharing	ng plans, and other similar debts	
Yes	■ Other. Specify _05 Retro Fi	tness Of Tom River	
Keith Hacker	Last 4 digits of account number		\$0.00
Nonpriority Creditor's Name C/O Borbi, Clancy & Patrizi 999 Route 73 North, Suite 103 Markton, N. I. 08053	When was the debt incurred?		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
	■ Disputed		
☐ At least one of the debtors and another	1	d claim:	
	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
Yes	Other. Specify		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3025 New Albany, OH 43054 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes First Credit Services Nonpriority Creditor's Name Attn: Bankruptcy Po Box 55 3 Sciles Ave Piscataway, NJ 08855 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Keith Hacker Nonpriority Creditor's Name C/O Borbi, Clancy & Patrizi 999 Route 73 North, Suite 103 Marlton, NJ 08053 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Anopriority Creditor's Name C/O Borbi, Clancy & Patrizi 999 Route 73 North, Suite 103 Marlton, NJ 08053 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No	Discover Financial Nonpriority Creditor's Name Attn: Bankruptcy Po Box 3025 New Albany, OH 43054 Number Street City State Zip Code Who incurred the debt? Check one.	Discover Financial Nonpromity Creditor's Name Attr. Bankruptcy Po Box 3025 Non- Albany, OH 4 3054 Number Street City State Zp Code Who incurred the debt? Check one. Check if this claim is for a community debt is the claim subject to offset? Contingent Check if this claim is for a community debt Non- Check if this claim is for a community debt Check if this claim i

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Case number (if known)

Debtor	1 Carlos M Jaime		Case number (if known)			
4.1 1	Kia Motors Finance	Last 4 digits of account number	4041	\$500.00		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 20835 Fountain Valley, CA 92728	When was the debt incurred?	Opened 05/18 Last Active 09/18			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	\square Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Lease				
4.1	Meridial Medical Group Nonpriority Creditor's Name	Last 4 digits of account number	8478	\$375.00		
	C/O C.Tech Collections, Inc PO Box 402	When was the debt incurred?				
	Mount Sinai, NY 11766 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	Other. Specify				
4.1	Monmouth Medical Center Nonpriority Creditor's Name	Last 4 digits of account number		\$600.00		
	P.O. Box 903 Oceanport, NJ 07757	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	Check if this claim is for a community debt		ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharin	g pians, and other similar debts			
	☐ Yes	Other Specify				

Official Form 106 E/F

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1 Carlos M Jaime	Case number (if known)	
No. 1 and 0 all and		A 0.400.04
New Jersey Surcharge	Last 4 digits of account number	\$6,428.00
Nonpriority Creditor's Name 13 Harrison St. Sayreville, NJ 08872	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify	
New York University Physician		
Services	Last 4 digits of account number	\$51.0
Nonpriority Creditor's Name PO Box 415662 Boston. MA 02241	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
□ Debtor 1 and Debtor 2 only	□ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt s the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
Northwell Health	Last 4 digits of account number	\$1,211.00
Nonpriority Creditor's Name PO Box 28372	When was the debt incurred?	. ,
New York, NY 10087 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	<u> </u>	
□Yes	Other Specify	

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Debt	OF F Carlos W Jaime	Case number (if known)	
4.1	Northwell Health	Lock 4 digits of account number	\$1,857.00
7	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ1,037.00
	PO Box 29772	When was the debt incurred?	
	New York, NY 10087		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<u> </u>	П	
	■ Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
		_	
	Yes	Other. Specify	
4.1	NYC Fire Department EMS	Last 4 digits of account number	\$928.00
8	Nonpriority Creditor's Name		Ψ020.00
	PO Box 27137	When was the debt incurred?	
	New York, NY 10087		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	_	
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No □ Yes		
	— 163	Other. Specify	
4.1 9	Raritan Bay Medical Center	Last 4 digits of account number 6182	\$5,978.00
	Nonpriority Creditor's Name		
	C/O Hackensach Meridian Health PO Box 650292	When was the debt incurred?	
	Dallas, TX 75265		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	

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Debtor	1 Carlos M Jaime	Case number (if known)	
4.2	Raritan Bay Medical Center - Perth Amboy	Last 4 digits of account number	\$1,555.00
	Nonpriority Creditor's Name C/O Akron 3585 Fridge Park Drive Akron, OH 44333	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	Retrofitness - Toms River Nonpriority Creditor's Name	Last 4 digits of account number	\$202.00
	C/O First Crfedit Services, Inc 377 Hoes Lane, Suite 200 Piscataway, NJ 08854	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	$\hfill \Box$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.2	Staten Island University Hospital	Last 4 digits of account number	\$2,075.00
	Nonpriority Creditor's Name C/O Northwell Health 1 Edgewater Plaza Suite 6 Staten Island, NY 10305	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	Other. Specify	
	· ·	— Outor, opeony	

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Debtor	1 Carlos M Jaime		Case number (if known)	
4.2	Stress Care of New Jersey	Last 4 digits of account number		\$550.00
	Nonpriority Creditor's Name PO Box 612	When was the debt incurred?		
	Englishtown, NJ 07726 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	,, ,		
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify		
4.2	Syncb/litt	Last 4 digits of account number	1758	\$1,560.00
	Nonpriority Creditor's Name		Opened 09/17 act Active	
	Attn: Bankruptcy Po Box 965060	When was the debt incurred?	Opened 08/17 Last Active 05/18	
	Orlando, FL 32896			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Charge Ac	count	
4.2	Synchrony bank / Littman Jewelers	Last 4 digits of account number		\$1,560.00
5	Nonpriority Creditor's Name	Last 4 digits of account number		41,000.00
	C/O Client Services, Inc	When was the debt incurred?		
	3451 Harry S Truman Blvd.			
	Saint Charles, MO 63301 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	, , , ,	is. Chook all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt	_	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	<u> </u>	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other Specify		

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Debtor 1 Carlos M Jaime Page 27 of 56

Case number (if known)

4.2 6	UBER Visa / Portfolio Recovery	Last 4 digits of ac	count number	8785		\$4,921.00
	Nonpriority Creditor's Name Attn: Bankruptcy 120 Corporate Blvd	When was the deb	ot incurred?	Opened 02/20 La 06/18	ast Active	
	Norfolk, VA 23502 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you	file, the claim i	s: Check all that apply		
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIO	RITY unsecured	l claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations aris	ing out of a sepa	ration agreement or divo	rce that you did not	
	Is the claim subject to offset? ■ No	report as priority cla		g plans, and other simila	r debts	
	Yes	Other. Specify	Factoring C Delaware	Company Account	Barclays Bank	

Part 3: List Others to Be Notified About a Debt That You Already Listed

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

Total Claim

				Total Claim
Total	6a.	Domestic support obligations	6a.	\$ 0.00
claims from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 0.00
	6f.	Student loans	6f.	\$ Total Claim 0.00
Total claims from Part 2	6g. 6h.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	6g. 6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 67,906.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 67,906.00

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Fill in this infor	mation to identify your	case:		
Debtor 1	Carlos M Jaime			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JEF	RSEY	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	whom you have the r, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2	J.,		- Cidio		
2.2					_
	Name				
	Number	Street			_
	Number	Street			
				710.0	_
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			
	City		State	ZIP Code	_
2.4	<u> </u>		<u> </u>	2 0000	
2.4					_
	Name				
	Number	Street			
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			
	City		State	ZIP Code	
	- Ny		Olalo		

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		Docume	III raye 23 0	1 30	
Fill in this info	ormation to identify your	case:			
Debtor 1	Carlos M Jaime				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	DISTRICT OF NEW JE	RSEY		
Case number					
(if known)					Check if this is an amended filing
Official E	'orm 10611				a a aa g
	orm 106H e H: Your Cod	<u>ohtors</u>			12/15
<u> </u>	e II. Ioui oou	CDIOIS			12/13
1. Do you	d case number (if known) have any codebtors? (If			as a codebtor.	
☐ Yes					
	the last 8 years, have you california, Idaho, Louisiana,				y states and territories include
■ No. Go □ Yes. Di	to line 3. d your spouse, former spou	use, or legal equivalent live	e with you at the time?		
in line 2 a Form 106 out Colun	gain as a codebtor only i D), Schedule E/F (Official	f that person is a guaran	tor or cosigner. Make	sure you have listed the 6G). Use Schedule D,	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	e, Number, Street, City, State and Z	P Code		Check all schedule	•
3.1				☐ Schedule D, line	е
Name	е			☐ Schedule E/F, li	
				☐ Schedule G, line	e
Num	ber Street			_	
City		State	ZIP Code		
3.2				☐ Schedule D, line	e
Name	е			☐ Schedule E/F, li	
				☐ Schedule G, line	
Num	ber Street			_	
City		State	ZIP Code		

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Fill	in this information to identify you	case:								
	otor 1 Carlos M									
	otor 2 use, if filing)				_					
Uni	ted States Bankruptcy Court for t	he: DISTRICT OF NEW J	JERSEY		_					
	se number own)		-			Check if this is An amend A supplem 13 income	ed fili ent s	showing _l	postpetition owing date:	
<u>O</u> 1	fficial Form 106I					MM / DD/	YYY	<u> </u>		
S	chedule I: Your In-	come								12/15
sup spo atta	as complete and accurate as populations of the population of the p	ou are married and not fili our spouse is not filing w n. On the top of any additi	ng jointly, and your ith you, do not inclu	spouse i	s liv natio	ing with you, inc on about your sp	lude ouse	informa e. If more	ation about e space is	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor	2 or	non-filir	ng spouse	
	If you have more than one job, attach a separate page with	Employment status	☐ Employed ■ Not employed			☐ Emp	•			
	information about additional employers.	Occupation	— Not employed							
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include studer or homemaker, if it applies.	t Employer's address								
		How long employed t	here?							
Par	t 2: Give Details About M	onthly Income								
	mate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to r	eport for a	any I	ine, write \$0 in the	e spa	.ce. Inclu	ıde your no	n-filing
-	u or your non-filing spouse have a space, attach a separate sheet		ombine the information	on for all e	mplo	oyers for that pers	on or	າ the line	es below. If	you need
						For Debtor 1		or Debto	or 2 or g spouse	
2.	List monthly gross wages, sa deductions). If not paid monthly			2.	\$	0.00	\$		N/A	
3.	Estimate and list monthly over	ertime pay.		3.	+\$	0.00	+:	\$	N/A	-
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$	0.00		\$	N/A	

Official Form 106l Schedule I: Your Income page 1

Debt	or 1	Carlos M Jaime	_	Ca	ise number (<i>if kr</i>	nown)				
				F	or Debtor 1		For	r Debtor	2 or	
	_				_			n-filing s	-	
	Cop	by line 4 here	4.	\$	5	0.00	\$_		N/A	<u> </u>
5.	List	all payroll deductions:								
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$		0.00	\$		N/A	1
	5b.	Mandatory contributions for retirement plans	5b.	\$	<u> </u>	0.00	\$		N/A	
	5c.	Voluntary contributions for retirement plans	5c.	\$		0.00	\$		N/A	
	5d.	Required repayments of retirement fund loans	5d.	*		0.00	\$_		N/A	_
	5e.	Insurance	5e.			0.00	\$_		N/A	_
	5f.	Domestic support obligations	5f.	\$		0.00	\$_		N/A	
	5g. 5h.	Union dues Other deductions. Specify:	5g. 5h			0.00	, \$ _		N/A N/A	_
•			_	T 4			_			_
6.		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$		0.00	\$_		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$		0.00	\$_		N/A	1
8.		all other income regularly received:								
	8a.	Net income from rental property and from operating a business, profession, or farm								
		Attach a statement for each property and business showing gross								
		receipts, ordinary and necessary business expenses, and the total	0 -	•			•			
	8b.	monthly net income. Interest and dividends	8a. 8b.).00).00	\$_ \$		N/A N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent		4	·	.00	Ψ_		IN/A	<u> </u>
	00.	regularly receive								
		Include alimony, spousal support, child support, maintenance, divorce	_				•			
	0-1	settlement, and property settlement.	8c.			0.00	\$_		N/A	_
	8d. 8e.	Unemployment compensation Social Security	8d. 8e.			0.00	\$_ \$		N/A N/A	_
	8f.	Other government assistance that you regularly receive	00.	4	·	.00	Ψ_		IN/A	<u> </u>
	···	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	•							
		Specify:	8f.	\$		0.00	\$_		N/A	<u>\</u>
	8g.	Pension or retirement income	8g.			0.00	\$_		N/A	_
	8h.	Other monthly income. Specify:	8h	+ \$	S	0.00	+ \$_		N/A	<u>\</u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	2,023	3.00	\$		N/	Α
		· ·	_		,-					
10.	Cal	culate monthly income. Add line 7 + line 9.	10. \$	\$	2,023.00	+ \$		N/A	= \$	2,023.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.			,	L				,
11.	Incl othe Do	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not a cify:	deper				•		e <i>J</i> . +\$	0.00
									$\overline{}$	
12.		If the amount in the last column of line 10 to the amount in line 11. The reside that amount on the Summary of Schedules and Statistical Summary of Certainlies						12.	\$	2,023.00
									Combi	ned
40	D -		^						month	ly income
13.	Do :	you expect an increase or decrease within the year after you file this form' No.	1							
		Yes. Explain: Looking for Employment.								

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	ition to identify yo	our case:			l			
	tor 1	Carlos M Jai				Ch	eck if th	is is:	
		Carios IVI Jai	IIIE					nended filing	
	otor 2								ring postpetition chapter the following date:
(Spo	ouse, if filing)						13 ex	penses as or t	rie following date.
Unit	ed States Bankı	ruptcy Court for the	: DISTRI	CT OF NEW JERSEY			MM /	DD / YYYY	
1	e number nown)								
Of	fficial Fo	rm 106J							
So	chedule	J: Your	Exper	nses					12/1
Be info nur	as complete or mation. If mater (if know	and accurate as lore space is ne n). Answer evel	possible eded, atta y questio	. If two married people anch another sheet to this					
Par 1.	t 1: Descr Is this a joir	ribe Your House nt case?	hold						
	No. Go to								
	_		in a separ	ate household?					
	□N	О							
	ΠY	es. Debtor 2 mus	st file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of De	ebtor 2.		
2.	Do you have	e dependents?	□ No						
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto			ependent's ge	Does dependent live with you?
	Do not state	the							■ No
	dependents	names.			Daughter		5		☐ Yes
					Doughtor				■ No
					Daughter		6		☐ Yes
					Daughter		18	8	■ No □ Yes
									□ No
									☐ Yes
3.	expenses o	penses include f people other t d your depende	han $_{f \Box}$	No Yes					
Est	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp					
the		h assistance an		government assistance i luded it on <i>Schedule I:</i> \				Your expe	enses
•		•				_			
4.		or home owners and any rent for the		ses for your residence. I or lot.	nclude first mortgag	e 4.	\$		700.00
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a.	\$		0.00
	•	rty, homeowner's				4b.	\$		0.00
				pkeep expenses		4c.	·		0.00
5.		owner's associat		dominium dues our residence. such as ho	ime equity loans	4d. 5.			0.00

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150.00 0.00 100.00 0.00 300.00 100.00 50.00 25.00 50.00 0.00 0.00
0.00 100.00 0.00 300.00 0.00 100.00 50.00 25.00 0.00 0.00
0.00 100.00 0.00 300.00 0.00 100.00 50.00 25.00 0.00 0.00
100.00 0.00 300.00 0.00 100.00 50.00 25.00 50.00 0.00
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2,375.00
2,313.00
-352.00
crease or decrease because of a

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Debtor 1	Carlos M Jaime				
Debtor 2	First Name	Middle Name	Last Name		
Spouse if, filing)	First Name	Middle Name	Last Name		
Jnited States Ba	ankruptcy Court for the:	DISTRICT OF NEW JE	RSEY		
Case number					☐ Check if this is an
					amended filing
Afficial Form	m 106Doo				
Official Form			Dalataria Oa		
Declarat	ion About a	an individual	Debtor's Sc	nedules	12/15
	y or property by fraud i 8 U.S.C. §§ 152, 1341, 1			•	ement, concealing property, or 00, or imprisonment for up to 20
ears, or both. 1	8 U.S.C. §§ 152, 1341, 1			•	, 0, 1, 3,
ears, or both. 1				•	, 0, 1, 3,
ears, or both. 1	8 U.S.C. §§ 152, 1341, 1	1519, and 3571.		n fines up to \$250,00	, 0, 1, 3,
ears, or both. 1	8 U.S.C. §§ 152, 1341, 1	1519, and 3571.	kruptcy case can result ir	n fines up to \$250,00	, 0, 1, 3,
ears, or both. 1 Sig Did you pa ■ No	8 U.S.C. §§ 152, 1341, 1	1519, and 3571.	kruptcy case can result ir	ankruptcy forms?	00, or imprisonment for up to 20
Sig Did you pa	8 U.S.C. §§ 152, 1341, 1 n Below y or agree to pay some	1519, and 3571.	kruptcy case can result ir	ankruptcy forms?	00, or imprisonment for up to 20
Did you pa No Yes. I	8 U.S.C. §§ 152, 1341, 1 n Below y or agree to pay some Name of person	eone who is NOT an attor	kruptcy case can result ir	ankruptcy forms? Attach Bani Declaration	No, or imprisonment for up to 20 kruptcy Petition Preparer's Notice, and Signature (Official Form 119)
Did you pa No Yes. No Under penathat they ar	8 U.S.C. §§ 152, 1341, 1 n Below y or agree to pay some Name of person lity of perjury, I declare	eone who is NOT an attor	kruptcy case can result in	ankruptcy forms? Attach Bani Declaration	No, or imprisonment for up to 20 kruptcy Petition Preparer's Notice, and Signature (Official Form 119)
Did you pa No Yes. I Under penathat they ar X /s/ Carlos	8 U.S.C. §§ 152, 1341, 1 In Below In Below In yor agree to pay some Name of person In the second of the secon	eone who is NOT an attor	rney to help you fill out ba	ankruptcy forms? Attach Bani Declaration	No, or imprisonment for up to 20 kruptcy Petition Preparer's Notice, and Signature (Official Form 119)
Did you pa No Yes. I Under penathat they ar X /s/ Carlos	8 U.S.C. §§ 152, 1341, 1 n Below y or agree to pay some Name of person lity of perjury, I declare e true and correct. los M Jaime	eone who is NOT an attor	rney to help you fill out ba	ankruptcy forms? Attach Bani Declaration	No, or imprisonment for up to 20 kruptcy Petition Preparer's Notice, and Signature (Official Form 119)

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Fill in	this inform	ation to identify your	case:			
Debto	r 1	Carlos M Jaime	MILL N			
Debto	r 2	First Name	Middle Name	Last Name		
	e if, filing)	First Name	Middle Name	Last Name		
United	d States Ban	kruptcy Court for the:	DISTRICT OF NEW JERS	SEY		
Case	number					
(if known)					_	Check if this is an mended filing
						S
∩ffi	cial For	m 107				
			Affaire for Individ	luale Filing for B	ankruntov	A14.0
			Affairs for Individ			4/19
					equally responsible for sup additional pages, write you	
). Answer every ques	•		, , , , , , , , , ,	
Part 1	Give D	etails About Your Ma	rital Status and Where You	Lived Before		
1. W	/hat is your	current marital statu	s?			
_] Married					
_	Not marr	ied				
ם כ			lived anywhere other than	whore you live new?		
2. D	During the last 3 years, have you lived anywhere other than where you live now?					
	No No					
	Yes. List all of the places you lived in the last 3 years. Do not include where you live now.					
I	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3. W	ithin the la	st 8 years, did you ev	ver live with a spouse or leg	gal equivalent in a commun	ity property state or territory	? (Community property
states	and territorie	es include Arizona, Cal	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto Ri	co, Texas, Washington and W	/isconsin.)
	No					
		ke sure you fill out <i>Sch</i>	nedule H: Your Codebtors (Of	fficial Form 106H).		
-		4. 6. 6.4				
Part 2	Explair	n the Sources of You	r Income			
F	ill in the total	l amount of income you	nployment or from operating understand a received from all jobs and a have income that you receive	all businesses, including part-		ndar years?
] No					
	-	in the details.				
			D. ()		D.L.	
			Debtor 1	Gross income	Debtor 2	Onese imagene
			Sources of income Check all that apply.	(before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:			■ Wages, commissions, bonuses, tips	\$7,080.50	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

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Case number (if known) Debtor 1 Carlos M Jaime Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For last calendar year: \$12,826.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2020) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$19,547.00 ☐ Wages, commissions, Wages, commissions. (January 1 to December 31, 2019) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. No Yes. Fill in the details. Debtor 2 Debtor 1 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) For last calendar year: Unemployment \$8,094.00 (January 1 to December 31, 2020) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more? □ No. Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Total amount

paid

Dates of payment

Amount you

still owe

Creditor's Name and Address

Was this payment for ...

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7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general par of which you are an officer, director, person in a business you operate as a sole proprietor. 11 alimony.	rtners; relatives of any gene control, or owner of 20% or	eral partners; partner r more of their voting	erships of which you	ou are a genera iny managing a	al partner; corporations agent, including one for
	■ No					
	Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
3.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cosi		ments or transfer a	iny property on a	account of a d	ebt that benefited an
	■ No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Pai	rt 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankrupto					
	modifications, and contract disputes.					
	□ No					
	Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	ne case
	Hacker Keith vs CARLOS JAIME VALDEZ, MICHELE DONATO, et al. L00311219	CIVIL NEW FILING	OCEAN SUPER - CIVIL - TOMS		☐ Pending ☐ On appe ☐ Conclud	eal
					- 0.00	
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below No. Go to line 11.		rty repossessed, f	oreclosed, garni	shed, attached	d, seized, or levied?
	☐ Yes. Fill in the information below.					
	Creditor Name and Address	Describe the Property		Date		Value of the property
		Explain what happened				
11.	accounts or refuse to make a payment beca		uding a bank or fir	nancial institutio	n, set off any a	amounts from your
	Yes. Fill in the details.	December 4k 11 11		5.1		A
	Creditor Name and Address	Describe the action the	creditor took	Date take	action was n	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an		rty in the possessi	ion of an assigne	ee for the bene	efit of creditors, a
	■ No					
	П Voo					

Debtor 1 Carlos M Jaime

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Debtor 1 Carlos M Jaime Case number (if known)

Par	t 5: List Certain Gifts and Contributions				
13.	Within 2 years before you filed for bankruptcy, No	did you give any gifts with a total val	ue of more th	an \$600 per person	?
	Yes. Fill in the details for each gift.	D 11 11 15		5 .	.,
	Gifts with a total value of more than \$600 per person	Describe the gifts		Dates you gave the gifts	Value
	Person to Whom You Gave the Gift and Address:				
14.	Within 2 years before you filed for bankruptcy,	did you give any gifts or contribution	s with a total	value of more than	\$600 to any charity?
	■ No□ Yes. Fill in the details for each gift or contribution	tion.			
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed		Dates you contributed	Value
Par	t 6: List Certain Losses				
15.	Within 1 year before you filed for bankruptcy o or gambling?	r since you filed for bankruptcy, did y	ou lose anytl	ning because of the	ft, fire, other disaster
	■ No				
	Yes. Fill in the details.				
	how the loss occurred Includ	ibe any insurance coverage for the lo e the amount that insurance has paid. L ince claims on line 33 of Schedule A/B:	ist pending	Date of your loss	Value of property lost
Par	t 7: List Certain Payments or Transfers				
16.	Within 1 year before you filed for bankruptcy, consulted about seeking bankruptcy or prepar Include any attorneys, bankruptcy petition prepare No Yes. Fill in the details.	ing a bankruptcy petition?			rty to anyone you
	Person Who Was Paid	Description and value of any prope	ertv	Date payment	Amount of
	Address Email or website address Person Who Made the Payment, if Not You	transferred	·	or transfer was made	payment
17.	Within 1 year before you filed for bankruptcy, or promised to help you deal with your creditors of Do not include any payment or transfer that you list No Yes. Fill in the details.	or to make payments to your creditors		r transfer any prope	rty to anyone who
	Person Who Was Paid	Description and value of any prem		Data naumant	Amount of
	Address	Description and value of any propertransferred	erty	Date payment or transfer was made	payment
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi Include both outright transfers and transfers made include gifts and transfers that you have already list. No	ness or financial affairs? as security (such as the granting of a se			
	☐ Yes. Fill in the details.				
	Person Who Received Transfer Address	Description and value of property transferred		ny property or received or debts	Date transfer was made
	Person's relationship to you		para ili oxe		

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Debtor 1 Carlos M Jaime Case number (if known)

19.	within 10 years before you filed for bankrupto beneficiary? (These are often called asset-prote		y property to a	a self-settle	d trust or similar device	of which you are a	
	No The state of th						
	Yes. Fill in the details.						
	Name of trust	Description and v	alue of the pro	perty trans	sferred	Date Transfer was made	5
Pa	List of Certain Financial Accounts, Instr	ruments, Safe Deposit	Boxes, and S	torage Unit	ts		
20.	Within 1 year before you filed for bankruptcy, sold, moved, or transferred? Include checking, savings, money market, or checking, savings, cooperatives, associated to the cooperative coo	other financial accour	nts; certificates	s of deposi		,	
	■ No □ Yes. Fill in the details.						
		ast 4 digits of account number	Type of acco instrument	unt or	Date account was closed, sold, moved, or transferred	Last balance before closing o transfe	r
21. Do you now have, or did you have within 1 year before you filed for bar cash, or other valuables?				ny safe de _l	posit box or other depos	itory for securities,	
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
22.	Have you stored property in a storage unit or	place other than your	home within 1	l year befo	re you filed for bankrupto	cy?	
	■ No □ Yes. Fill in the details.						
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, S State and ZIP Code)		Describe	the contents	Do you still have it?	
Pa	rt 9: Identify Property You Hold or Control fo	or Someone Else					
23.	Do you hold or control any property that some for someone.	eone else owns? Inclu	ude any proper	rty you bor	rowed from, are storing	for, or hold in trust	
	■ No □ Yes. Fill in the details.						
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe	the property	Value	е
Pa	rt 10: Give Details About Environmental Inform	mation					
For	the purpose of Part 10, the following definition	s apply:					
	Environmental law means any federal, state, or toxic substances, wastes, or material into the regulations controlling the cleanup of these s	air, land, soil, surface	e water, ground				r
	Site means any location, facility, or property a to own, operate, or utilize it, including disposa	=	environmental	law, wheth	er you now own, operate	e, or utilize it or used	d
Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substant hazardous material, pollutant, contaminant, or similar term.				s waste, ha	zardous substance, toxi	c substance,	

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

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Debtor 1 Carlos M Jaime Case number (if known)

24.	4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?			
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of an	y release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or admin	nistrative proceeding under any envir	ronmental law? Include settlements a	and orders.
	■ No □ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	11: Give Details About Your Business or Co	onnections to Any Business		
27.	Within 4 years before you filed for bankruptcy	, did you own a business or have any	y of the following connections to any	business?
	☐ A sole proprietor or self-employed in a	a trade, profession, or other activity,	either full-time or part-time	
	☐ A member of a limited liability compan	y (LLC) or limited liability partnershi	p (LLP)	
	☐ A partner in a partnership			
	☐ An officer, director, or managing exec	utive of a corporation		
	☐ An owner of at least 5% of the voting o	or equity securities of a corporation		
	■ No. None of the above applies. Go to Par	rt 12.		
	☐ Yes. Check all that apply above and fill in	the details below for each business		
	Business Name D Address	Describe the nature of the business	Employer Identification number Do not include Social Security I	
		lame of accountant or bookkeeper	Dates business existed	
28.	Within 2 years before you filed for bankruptcy institutions, creditors, or other parties.	, did you give a financial statement to		de all financial
	■ No			
	Yes. Fill in the details below.			
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		

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Debtor 1	Carlos M Jaime		Case number (if known)
Part 12:	Sign Below		
are true ar with a ban		ng a false statement, concealing p	ments, and I declare under penalty of perjury that the answers property, or obtaining money or property by fraud in connection r up to 20 years, or both.
/s/ Carlo	s M Jaime		
Carlos M Signature	I Jaime of Debtor 1	Signature of Debtor	2
Date Ma	ay 14, 2021	Date	
Did you at ■ No □ Yes	tach additional pages to <i>Your Stat</i>	tement of Financial Affairs for Ind	ividuals Filing for Bankruptcy (Official Form 107)?
Did you pa	y or agree to pay someone who is	s not an attorney to help you fill o	ut bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor 1	Carlos M Jaime			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
	ankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number (if known)				Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.
- You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1	Carlos M Jaime	Case number (if known)	
proper	ption of ty ng debt:	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	□ Yes
n the info	ormation below. Do not list real estat	erty Leases at you listed in Schedule G: Executory Contracts and Unexpire te leases. Unexpired leases are leases that are still in effect; the erty lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2	e lease period has not yet ended.
Describe	your unexpired personal property le	eases	Will the lease be assumed?
Lessor's i Description Property:	on of leased		□ No □ Yes
Lessor's i Description Property:	on of leased		□ No □ Yes
Lessor's i Description Property:	on of leased		□ No □ Yes
Lessor's i Description Property:	on of leased		□ No □ Yes
Lessor's i Description Property:	on of leased		□ No □ Yes
Lessor's i Description Property:	on of leased		□ No □ Yes
Lessor's i Description	on of leased		□ No □ Yes
Part 3: Jnder per	nalty of perjury, I declare that I have	indicated my intention about any property of my estate that sec	
X <u>/s/</u> (that is subject to an unexpired lease. Carlos M Jaime los M Jaime	X Signature of Debtor 2	
	nature of Debtor 1	Date	
Dale	, iviay i≒, ∠UZ i	Daic	

Fill in this info	ormation to identify your case:		Ch	eck one box	only as d	lirected in this form and	in Form
Debtor 1	Carlos M Jaime		122	2A-1Supp:			
Debtor 2 (Spouse, if filing)				■ 1. There	is no pres	umption of abuse	
United States	Bankruptcy Court for the: District of New Je	sey		applie	s will be r	o determine if a presur nade under <i>Chapter 7</i> icial Form 122A-2).	
Case numbe	r			☐ 3. The Me	eans Test	does not apply now be	
						n amended filing	<u></u>
Official I	Form 122A - 1					g	
Chapte	r 7 Statement of Your Cur	rent Mor	nthly Inc	ome			04/20
attach a separa case number (i qualifying milit	e and accurate as possible. If two married people at the sheet to this form. Include the line number to vif known). If you believe that you are exempted frowary service, complete and file Statement of Exemplaculate Your Current Monthly Income	which the addition m a presumption otion from Presun	nal information a of abuse becau	applies. On th se you do no	ne top of a t have pri	ny additional pages, wri narily consumer debts o	te your name and or because of
_	s your marital and filing status? Check one or	ıly.					
	married. Fill out Column A, lines 2-11.	ut hath Calumna	A and D. lines	0.44			
_	ied and your spouse is filing with you. Fill on ited and your spouse is NOT filing with you.		•	2-11.			
_	ving in the same household and are not lega	•	•	lumns A and	IR lines	2-11	
□ Li· p·	ving separately or are legally separated. Fill enalty of perjury that you and your spouse are leving apart for reasons that do not include evading	out Column A, lir egally separated	nes 2-11; do no I under nonban	ot fill out Colu kruptcy law	umn B. By that appli	checking this box, you	
101(10A). F the 6 month	verage monthly income that you received from all or example, if you are filing on September 15, the 6-m s, add the income for all 6 months and divide the total n the same rental property, put the income from that p	nonth period would by 6. Fill in the res	be March 1 throught. Do not include	ugh August 31 de any income	. If the ame amount m	ount of your monthly incon ore than once. For examp	ne varied during ble, if both
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
	oss wages, salary, tips, bonuses, overtime, deductions).	and commission	ons (before all	\$	0.00	\$	
	y and maintenance payments. Do not include B is filled in.	payments from	a spouse if	\$	0.00	\$	
of you of from an and room	ounts from any source which are regularly program of your dependents, including child support unmarried partner, members of your household members. Include regular contributions from a space of the program of the pro	 Include regular your depender 	contributions nts, parents,	\$	0.00	\$	
	Do not include payments you listed on line 3. ome from operating a business, profession,	or farm					
		Deb	tor 1				
Gross re	eceipts (before all deductions)	\$ 0.00					
	y and necessary operating expenses	-\$ 0.00	Camulhara	c	0.00	Φ.	
	onthly income from a business, profession, or far	m \$	Copy here ->	>	0.00	\$	
6. Net ince	ome from rental and other real property	Deb	tor 1				
Gross re	eceipts (before all deductions)	\$ 0.00					
	y and necessary operating expenses	-\$ 0.00					
Net mor	nthly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	
7. Interest	t, dividends, and royalties			\$	0.00	\$	

Official Form 122A-1

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Carlos M Jaime Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 2,023.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For your spouse \$ 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled 0.00 if retired under any provision of title 10 other than chapter 61 of that title. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments made under the Federal law relating to the national emergency declared by the President under the National Emergencies Act (50 U.S.C. 1601 et seq.) with respect to the coronavirus disease 2019 (COVID-19); payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below... 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 2,023.00 2,023.00 each column. Then add the total for Column A to the total for Column B. Total current monthly Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 2,023.00 Multiply by 12 (the number of months in a year) **x** 12 24,276.00 12b. The result is your annual income for this part of the form 12b 13. Calculate the median family income that applies to you. Follow these steps: NJ Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of household. 71,941.00 13 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Do NOT fill out or file Official Form 122A-2. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2. Part 3: By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Carlos M Jaime

Carlos M Jaime
Official Form 122A-1

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Debtor 1	Carlos M Jaime	Case number (if known)	
	Signature of Debtor 1		
Dat	May 14, 2021 MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		
	If you checked line 14b, fill out Form 122A-2 and file it with this form	n.	

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Debtor 1 Carlos M Jaime Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 11/01/2020 to 04/30/2021.

Line 8 - Unemployment compensation (included in CMI)

Source of Income: **Unemployment** Constant income of **\$2,023.00** per month.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$78	administrative fee
+ \$15	trustee surcharge
\$338	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$571 administrative fee

\$1,738 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$78	administrative fee
	\$278	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$78	administrative fee
	\$313	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/forms/bankruptcy-forms

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.uscourts.gov/services-forms/bankruptcy/credit-counseling-and-debtor-education-courses.

In Alabama and North Carolina, go to: http://www.uscourts.gov/services-forms/bankruptcy/cre dit-counseling-and-debtor-education-courses.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 21-14025-CMG Doc 1 Filed 05/14/21 Entered 05/14/21 15:23:28 Desc Main Document Page 52 of 56

B2030 (Form 2030) (12/15)

United States Bankruptcy Court District of New Jersey

In re	Carlos M Jaime		•	Case N	lo.	
			Debtor(s)	Chapte	er 7	
	DISCLOS	SURE OF COMPE	NSATION OF ATTOR	NEY FOR	DEBTOR(S)	
c	rursuant to 11 U .S.C. § 329(a ompensation paid to me with	(a) and Fed. Bankr. P. 2016 hin one year before the filin	5(b), I certify that I am the attorneng of the petition in bankruptcy, of	ey for the above or agreed to be p	named debtor(s) and	
	For legal services, I have	e agreed to accept		\$	1,300.00	
					550.00	
					750.00	
2. T	The source of the compensation	on paid to me was:				
	■ Debtor □ O	other (specify):				
3. T	The source of compensation to	to be paid to me is:				
	■ Debtor □ O	other (specify):				
4. I	I have not agreed to share	e the above-disclosed comp	pensation with any other person u	nless they are m	embers and associa	tes of my law firm.
[my law firm. A
5. I	n return for the above-disclo	osed fee, I have agreed to re	ender legal service for all aspects	of the bankrupto	cy case, including:	
b c	 Preparation and filing of a Representation of the debt [Other provisions as neede Negotiations with reaffirmation agree 	ny petition, schedules, stat tor at the meeting of credit ed] n secured creditors to re eements and application	tement of affairs and plan which ors and confirmation hearing, and reduce to market value; exec ons as needed; preparation a	may be required I any adjourned mption planni	; hearings thereof; ng; preparation a	and filing of
6. B	By agreement with the debtor Representation of	r(s), the above-disclosed fe	ee does not include the following		ınces, relief from	stay actions or
		Debtor(s) Chapter 7 DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S) Il U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that n paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: all services, I have agreed to accept \$ 1,300.00 the filing of this statement I have received \$ 5550.00 Due \$ 750.00 The compensation paid to me was: of the compensation paid to me was: of compensation to be paid to me is: of compensation to be paid to me is: of agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. A the agreement, together with a list of the names of the people sharing in the compensation is attached. the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; on and filing of any petition, schedules, statement of affairs and plan which may be required: tation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; ovisions as needed] gotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of fiftirmation agreements and applications as needed; preparation and filing of motions pursuant to 11 USC 2(f)(2)(A) for avoidance of liens on household goods. In with the debtor(s), the above-disclosed fee does not include the following service: presentation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or a other adversary proceeding. CERTIFICATION the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) i				
	certify that the foregoing is a unkruptcy proceeding.	a complete statement of an	ny agreement or arrangement for	payment to me for	or representation of	the debtor(s) in
Ma	ay 14, 2021		/s/ Robert C. Niser	nson		
Do	•		Signature of Attorney Robert C. Nisenso 10 Auer Court East Brunswick, N 732-238-8777 Fax rnisenson@aol.co	on, L.L.C. IJ 08816 :: 732-238-875	8	

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United States Bankruptcy CourtDistrict of New Jersey

		District of New Jersey					
In re	Carlos M Jaime		Case No.				
		Debtor(s)	Chapter	7			
VERIFICATION OF CREDITOR MATRIX							
e abo	ove-named Debtor hereby verific	es that the attached list of creditors is true and co	errect to the best	of his/her knowledge.			
ate:	May 14, 2021	/s/ Carlos M Jaime					
		Carlos M Jaime					

Signature of Debtor

American Honda Finance C/O Synergetic Communication, Inc 5450 N.W Central #220 Houston, TX 77092

Amex C/O Nationwide Credit, Inc Po Box 14581 Des Moines, IA 50306

Bard Cardiology PO Box 100260 Staten Island, NY 10310

Capio Partners Llc Attn: Bankruptcy Po Box 3498 Sherman, TX 75091

Chase Card Services Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850

Community Medical Center C/O EMA PO Box 6081 Parsippany, NJ 07054

Community Medical Center C/O BCA Financial Services, Inc 18001 Old Cutler Road Suite 462 Miami, FL 33157-6437

Discover Financial Attn: Bankruptcy Po Box 3025 New Albany, OH 43054

First Credit Services Attn: Bankruptcy Po Box 55 3 Sciles Ave Piscataway, NJ 08855 Keith Hacker C/O Borbi, Clancy & Patrizi 999 Route 73 North, Suite 103 Marlton, NJ 08053

Kia Motors Finance Attn: Bankruptcy Po Box 20835 Fountain Valley, CA 92728

Meridial Medical Group C/O C.Tech Collections, Inc PO Box 402 Mount Sinai, NY 11766

Monmouth Medical Center P.O. Box 903 Oceanport, NJ 07757

New Jersey Surcharge 13 Harrison St. Sayreville, NJ 08872

New York University Physician Services PO Box 415662 Boston, MA 02241

Northwell Health PO Box 28372 New York, NY 10087

Northwell Health PO Box 29772 New York, NY 10087

NYC Fire Department EMS PO Box 27137 New York, NY 10087

Raritan Bay Medical Center C/O Hackensach Meridian Health PO Box 650292 Dallas, TX 75265 Raritan Bay Medical Center - Perth Amboy C/O Akron 3585 Fridge Park Drive Akron, OH 44333

Retrofitness - Toms River C/O First Crfedit Services, Inc 377 Hoes Lane, Suite 200 Piscataway, NJ 08854

Staten Island University Hospital C/O Northwell Health 1 Edgewater Plaza Suite 6 Staten Island, NY 10305

Stress Care of New Jersey PO Box 612 Englishtown, NJ 07726

Syncb/litt Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Synchrony bank / Littman Jewelers C/O Client Services, Inc 3451 Harry S Truman Blvd. Saint Charles, MO 63301

UBER Visa / Portfolio Recovery Attn: Bankruptcy 120 Corporate Blvd Norfolk, VA 23502